

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

RCE 101772,240

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXCLUDED
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	<u>25</u> minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(d))	<u>2</u> minus 3 =	

* If the difference in column 1 is less than zero, enter '0' in column 2.

SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
RATE	Fee			RATE	Fee
	\$.....	OR		\$.....	
X \$.....*		OR		X \$.....*	
X \$.....*		OR		X \$.....*	
\$.....*		OR		\$.....*	
TOTAL				TOTAL	

CLAIMS AS AMENDED - PART II

10120105 (Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(a)(1))	25	Minus	25	-
Independent (37 CFR 1.16(a)(1))	2	Minus	3	✓

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE
<u>x \$ 25</u>		OR	<u>x \$ 50</u>	
<u>x \$ 100</u>		OR	<u>x \$ 200</u>	
<u>+ \$</u>		OR	<u>+ \$</u>	
TOTAL ADDL FEE		OR	TOTAL ADDL FEE	

		(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (1) (CFR 146(d))	Minus	**	:
	Independent (2) (CFR 146(d))	Minus	***	:

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAUSE (3) CES 1 16 (g) 11

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X \$ ____ :		ON	X \$ ____ :
X \$ ____ :		ON	X \$ ____ :
4 \$ ____ :		ON	X \$ ____ :
TOTAL		TOTAL	
ADDL FEE		ADDL FEE	

		(Column 1)	(Column 2)	(Column 3)	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESUMED NUMBER	
	Total claims issued	*	Minus	**	?
	Independent (not C.R. capable)	*	Minus	***	?

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RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X \$ ____ =		OR	X \$ ____ =
X \$ ____ =		OR	X \$ ____ =
+ \$ ____ =		OR	+ \$ ____ =
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE

• If the value in column 1 is less than the value in column 2, move it to column 3.

• If the entry in column 1 is less than the entry in column 2, write 'U' in column 3.

If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter '20'. If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter '3'.

The Highest Number Previously Paid for This SPACE is less than 3, enter 3.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the person which is to be had by the USPTO to process an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 months to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Comptroller for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

For more information, call 1-800-810-8188, visit [ams.org](http://www.ams.org), or write to the American Mathematical Society, 201 Charles Street, Providence, Rhode Island 02904-2294, USA.